

SECRETARY OF STATE STATUTORY DOCUMENTS SECTION P.O. BOX 12887, AUSTIN, TX 78711-2887

CARD PAYMENT FORM FAX NO. (512) 463-0873 TEL NO. (512) 463-5705

FOR CUSTOMER USE (PLEASE PRINT OR TYPE)			
Name of Cardholder:			
Address of Cardholder:			
City:	State:		Zip:
Name of Requestor (if different than cardholder):			
Address of Requestor:			
City:	State:		Zip:
Phone No.: ()	FAX No.: ()		
TYPE OF DOCUMENT TO BE FILED:	NAME ON DOCUMENT:		
	I		
SELECT PAYMENT CARD TYPE AND PROVIDE REQUESTED INFORMATION			
Charge to: ☐ VISA ☐ MASTERCARD ☐ DISCOVER		Charge to: ☐ LegalEase	
Card No.:		Card No.:	
Expiration Date:		Client No.: Case No.:	
Signature:		Signature:	
		* For information about LegalEase, call 1-800-253-5749	
FOR SECRETARY OF STATE USE ONLY			
EMPLOYEE NAME:			
DATE:			
		FEE(S):	\$
CONVENIENCE FEE (Credit Card Payment Only) 2.1%: \$			\$

Form #2101 Revised: 3/7/03

TOTAL AMOUNT